

ANALGESIC MEDICATIONS

Continued...

NALOXONE

Narcotic (opiate) antagonist

Used by Combat Medics (CM)

For narcotic opiate overdose and reversal of effects, including respiratory depression, sedation, and hypotension.

DOSAGE(S): 0.4-2 mg IV, IN or IM; repeat every 2-3 min to a max dose of 10 mg, as indicated

ROUTE(S): IV, IN, IM

CONTRA-INDICATIONS: Hypersensitivity to naloxone, use cautiously in patients with cardiac irritability, considered relatively safe in pregnancy, if clinically indicated

POTENTIAL SIDE EFFECTS: Analgesia reversal, tremors, hyperventilation, drowsiness, sweating, increased BP, tachycardia, nausea, vomiting

DRUG INTERACTIONS: Cardiotoxic drugs (may cause serious CV effects) – use together cautiously, reverses analgesic effects of narcotic (opiate) agonists

ONSET / PEAK / DURATION: 1-2 min/5-15 min/variable

TACTICAL CONSIDERATIONS: An overdose of naloxone is unlikely if used as indicated; naloxone should be readily available anytime narcotics are being administered; titrate to effect (resolving narcotic overdose signs and symptoms) but continue to manage casualty's pain; naloxone may wear off prior to opiate – observe closely for signs of recurrent opiate overdose.



ONDANSETRON

Antiemetic (5-HT3 antagonist)

Used by Combat Medics (CM)

Prevention and management of nausea and vomiting associated with pain management medications.

DOSAGE(S): 4 mg q 8 hrs, repeat after 15 min for persistent symptoms, no more than 8 mg/8 hr time block

ROUTE(S): IV, IO, Translingual, IM

CONTRA-INDICATIONS: Hypersensitivity to ondansetron, use cautiously in patients with hepatic failure, considered relatively safe in pregnancy, if clinically indicated

POTENTIAL SIDE EFFECTS: Dizziness, lightheadedness, headache, sedation, diarrhea, constipation, dry mouth

DRUG INTERACTIONS: Rifampin may decrease ondansetron levels

ONSET / PEAK / DURATION: 20 sec-4 min (IV<IO<translingual<IM)/10-40 min/4 hr

TACTICAL CONSIDERATIONS: Do not use PO (pill form) – use translingual with the oral dissolving tablet (oral ondansetron is **NOT** an acceptable alternative to the ODT formulation); do not handle ODT preparation with wet hands; IV and IO should be given by slow push.

